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Substitute for form 1449/PTO <h2 style="text-align: center;">INFORMATION DISCLOSURE STATEMENT BY APPLICANT</h2> <p style="text-align: center;">(Use as many sheets as necessary)</p>		Complete if Known <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td style="width: 50%;"></td> </tr> <tr> <td>Filing Date</td> <td style="text-align: center; font-size: 1.2em;">10/552559</td> </tr> <tr> <td>First Named Inventor</td> <td>Sahasrabudhe, et al.</td> </tr> <tr> <td>Art Unit</td> <td></td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> <tr> <td>Attorney Docket Number</td> <td>PU030114</td> </tr> </table>		Application Number		Filing Date	10/552559	First Named Inventor	Sahasrabudhe, et al.	Art Unit		Examiner Name		Attorney Docket Number	PU030114
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Attorney Docket Number	PU030114														
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U.S. PATENT DOCUMENTS					
Examiner Initials *	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number - Kind Code ² (if known)			
	AA	US-5,483,685	01-09-1996	Okamura	
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FOREIGN PATENT DOCUMENTS						
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Examiner Signature	Date Considered	
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Complete if Known

10/552559

Application Number

Filing Date

Herewith

First Named Inventor

Sahasrabudhe, et al.

Art Unit

Examiner Name

Attorney Docket Number

PU030114

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**Examiner
Signature**

Date
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